

 <small>INCORPORATED PROFESSIONAL SERVICES</small>	<b>Breast: Mammo Protocols</b>		
	Reviewed: No Changes	Date: 1/14/2021	D. Cameron
	Revised:	Date:	

If patient has implants, the full field lateral should be with the implant in place, not pushed back.

1. Asymmetry seen in MLO only
  - a. Full field lateral
  - b. Spot compress in lateral projection if seen, otherwise in MLO.
2. Asymmetry seen in the CC only
  - a. Full field lateral
  - b. Spot compress in CC projection
3. Focal asymmetry (by definition seen in both views) or distortion
  - a. Full field lateral
  - b. Spot compress in CC projection
  - c. Spot compress in lateral projection
4. Calcifications-mags are done without tomo
  - a. Full field lateral
  - b. Spot magnification in CC projection
  - c. Spot magnification in lateral projection
5. Physical complaint (lump, pain, nipple discharge)
 

Mark lump/pain with appropriate marker where patient puts finger.

  - a. Full field CC, MLO and lateral
  - b. All patients with physical complaints will have an US scheduled to follow. Radiologist may decline to preform if mammogram clarifies complaint.
6. History of breast cancer or of biopsy requiring diagnostic follow up (most biopsies don't require a diagnostic follow up, but some will at radiologist's discretion.)
  - a. Full field CC, MLO and lateral
7. Post biopsy (day biopsy performed)
  - a. Full field CC and lateral, without tomo.

Please note we will not require diagnostics for history of breast cancer or for patient with implants. However, if the patient or their clinician choose a diagnostic in these cases that is fine.